

ISSUE SLIP STAMP AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	66621	10/8
O.I.P.E. CLASSIFIER		47	10/14/99
FORMALITY REVIEW	ALY 9/16/99		10-20-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		✓	10/8/99
2		✓	10/8/99
3		✓	10/8/99
4		✓	10/8/99
5		✓	10/8/99
6		✓	10/8/99
7		✓	10/8/99
8		✓	10/8/99
9		✓	10/8/99
10		✓	10/8/99
11		✓	10/8/99
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42		✓	10/8/99
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46		✓	10/8/99
47		✓	10/8/99
48		✓	10/8/99
49		✓	10/8/99
50		✓	10/8/99

Claim	Final	Original	Date
51		✓	10/8/99
52		✓	10/8/99
53		✓	10/8/99
54		✓	10/8/99
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97		✓	10/8/99
98		✓	10/8/99
99		✓	10/8/99
100		✓	10/8/99

Claim	Final	Original	Date
110			
112			
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